


POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Electronic Version v05

Stylesheet Version v05.0

Title of Invention	BODY FORCE ALARMING APPARATUS AND METHOD
First Named Applicant :	Dr. Kevin Groid
Attorney Docket Number :	3050-02
I hereby appoint the registered practitioner(s) at Customer Number:	
37101	
as attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.	
I am the Applicant/Inventor.	
Full Name of Applicant of Record:	
Mr. Michael P. Eddy	
Signature: /michaelpeddy/	Date: 2004-02-24

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number

Filing Date

First Named Inventor

GROLD, KEVIN

Title

Art Unit

Examiner Name

Attorney Docket Number

3050-02

I hereby appoint:



Practitioners associated with the Customer Number:

37,101

OR



Practitioner(s) named below:

Name	Registration Number

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I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Adrian Pelkus

Signature

Date

02-21-04

Telephone

760 473 2696

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

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Application Number	
Filing Date	
First Named Inventor	GROLD, KEVIN
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Art Unit	
Examiner Name	
Attorney Docket Number	3050-02

I hereby appoint:

☒ Practitioners associated with the Customer Number:

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OR

☐ Practitioner(s) named below:

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name Kevin Groid

Signature 

Date 02-21-04

Telephone 858-481-5148

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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